

WENDY L. WATANABE AUDITOR-CONTROLLER

> MARIA M. OMS CHIEF DEPUTY

August10, 2010

# COUNTY OF LOS ANGELES DEPARTMENT OF AUDITOR-CONTROLLER

KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET, ROOM 525 LOS ANGELES, CALIFORNIA 90012-3873 PHONE: (213) 974-8301 FAX: (213) 626-5427

ASST. AUDITOR-CONTROLLERS

ROBERT A. DAVIS **OMIAN NHOL** JUDI E. THOMAS

TO:

Supervisor Gloria Molina, Chair

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky

Supervisor Don Knabe

Supervisor Michael D. Antonovich landy I Watambe

FROM:

Wendy L. Watanabe

Auditor-Controller

SUBJECT:

EL CENTRO DEL PUEBLO, INC. PROGRAM

DEPARTMENT OF MENTAL HEALTH SERVICE PROVIDER

We completed a program review of El Centro Del Pueblo, Inc. (El Centro or Agency), a Department of Mental Health (DMH) service provider. The purpose of our review was to determine whether El Centro provided the services and maintained proper documentation, as required by the County contract. The review included interviewing program clients, assessing their mental health needs, and developing and implementing a treatment plan.

DMH paid El Centro on a cost-reimbursement basis between \$1.83 and \$4.37 per minute of staff time (\$109.80 to \$262.20 per hour) for services or approximately \$616,000 for Fiscal Year 2008-09. The Agency's headquarters is located in the First District.

# **Results of Review**

El Centro maintained documentation to support all the service minutes sampled and staff assigned to the County contract possessed the required qualifications. However, the Agency did not comply with other County contract requirements. Specifically, El Centro did not:

Complete some elements of the Assessments, Client Care Plans and Progress Notes in accordance with the County contract.

Board of Supervisors August 10, 2010 Page 2

- El Centro's attached response indicates that they will implement our recommendation by modifying their monthly trainings and their review of new case files.
- Document the Informed Consent for four (33%) of the 12 clients' charts sampled where the clients received treatment with psychotropic medication.
  - El Centro's attached response indicates that they will correctly file the Informed Consent in the future. .

We have attached the details of our review along with recommendations for corrective action.

## Review of Report

We discussed the results of our review with El Centro and DMH. In the attached response, the Agency agreed with our findings and recommendations. DMH will follow-up to ensure that the recommendations were implemented.

We thank El Centro management for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:MMO:JET:DC:EB

#### Attachment

c: William T Fujioka, Chief Executive Officer Dr. Marvin J. Southard, Director, Department of Mental Health Armando Barragan, Chairperson, Board of Directors, El Centro Sandra L. Figueroa-Villa, Executive Director, El Centro Public Information Office Audit Committee

## DEPARTMENT OF MENTAL HEALTH EL CENTRO DEL PUEBLO, INC. FISCAL YEAR 2008-09

### BACKGROUND/PURPOSE

The Department of Mental Health (DMH) contracts with El Centro Del Pueblo, Inc. (El Centro or Agency) a private, non-profit, community-based organization that provides services to clients in Service Planning Area 4. Services include interviewing program clients, assessing their mental health needs, and developing and implementing a treatment plan.

The purpose of our review was to determine if El Centro maintained documentation for the service minutes billed in accordance with the County contract. This included a review of the Agency's billings, participant charts and personnel records. We also interviewed Agency's staff.

### BILLED SERVICES

### Objective

Determine whether El Centro provided the services billed in accordance with their County contract with DMH.

## <u>Verification</u>

We judgmentally selected 30 billings totaling 2,043 minutes from 28,139 service minutes of approved Medi-Cal billings for May and June 2009, which were the most current billings available at the time of our review (March 2010). We reviewed the Assessments, Client Care Plans, Progress Notes and Informed Consents maintained in the clients' charts for the selected billings. The 2,043 minutes represent services provided to 15 program participants.

#### Results

El Centro maintained documentation to support the service minutes sampled. However, the Agency did not always complete some elements of the Assessments, Client Care Plans, Progress Notes and Informed Consents in accordance with the County contract requirements.

### <u>Assessments</u>

El Centro did not adequately describe the clients' symptoms and behaviors consistent with the Diagnostic and Statistical Manual of Mental Disorder (DSM) to support the given diagnosis for nine (60%) of the 15 clients sampled on their Assessments. An Assessment is a diagnostic tool used to document the clinical evaluation of each client

and establish the client's mental health treatment needs. The County contract requires Agencies to follow the DSM when diagnosing clients.

## Client Care Plans

El Centro did not complete some elements for 12 (80%) of the 15 Client Care Plans sampled in accordance with the County contract. Specifically:

- Seven Client Care Plans for the Targeted Case Management did not contain goals that are related to the services billed.
- Five Client Care Plans for the Mental Health Services did not contain specific and measurable/quantifiable goals.

### Progress Notes

El Centro did not complete some elements for 17 (57%) of the 30 Progress Notes sampled in accordance with the County contract. Specifically:

- Ten Progress Notes for Medication Services did not indicate that the clients were questioned about side effects, response to medication and clients' compliance with the medication regime.
- Five Progress Notes for Mental Health Services did not describe what the clients or service staff attempted and/or accomplished towards the clients' goals.
- Two Progress Notes for the Targeted Case Management did not document linkage and/or consultation.

# Informed Consent

El Centro did not document the Informed Consent for four (33%) of the 12 clients' charts sampled, in which the clients received treatment with psychotropic medication. Informed Consent is the client's agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks.

# Recommendations

# El Centro management:

- 1. Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with the County contract.
- 2. Ensure that Informed Consent is obtained and documented in the client's chart on an annual basis.

### STAFFING LEVELS

### **Objective**

Determine whether the Agency maintained the appropriate staffing ratios for applicable services.

We did not perform test work in this section, as the Agency did not provide services that require staffing ratios for this particular program.

## Recommendation

None.

## STAFFING QUALIFICATIONS

## **Objective**

Determine whether El Centro's treatment staff possessed the required qualifications to provide the services.

## Verification

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for eight of the 12 El Centro treatment staff who provided services to DMH clients during May and June 2009.

### Results

Each employee in our sample possessed the qualifications required to provide the services billed.

### Recommendation

None.



## El Centro Del Pueblo

1157 Lemoyne Street, Los Angeles, California 90026

elcantrodelpueblo.org

Tel: 213-483-6335 • Fax: 213-483-5523

May 27, 2010

Wendy L. Watanabe Los Angeles County Auditor Controller Kenneth Hahn Hall of Administration 500 W Temple Street, Room 525 Los Angeles, CA 90012

Ms Watanabe:

El Centro del Pueblo appreciates the feedback provided regarding the specific recommendations and has a response regarding the corrective actions we have implemented in order to ensure complete compliance with all aspects of our contractual obligations with Los Angeles County.

We will address the two specific recommendations cited in the report:

<u>Recommendation #1</u> – Ensure that assessments, client care plans, and progress notes are completed in accordance with the county contract.

- 1. El Centro del Pueblo will <u>modify its monthly training schedule to</u> <u>institute specific workshops</u> designed to ensure that clinical staff are:
  - a. clear about the expectations and requirements regarding the thorough completion of assessments and the documentation of symptoms that inform the specific diagnosis applied to the client
  - b. engaging in and clearly documenting efforts employed to attempt to/accomplish the client's treatment goals
  - c. engaging in and clearly documenting efforts to accomplish the linkage and referral efforts of all targeted case management activities
- 2. El Centro del Pueblo will review all new assessments during our weekly group supervision/case disposition meetings to ensure alignment of assessment information with identified diagnoses, treatment goals and interventions.
- 3. El Centro will provide <u>additional training opportunities</u> to its clinical staff, via DMH's training department or other workshops provided

via the professional mental health community, to allow for the continued professional development of all its staff

4. El Centro del Pueblo will ensure that the <u>staff evaluation process</u> continues to reinforce and cite specific expectations regarding the skill sets of its clinicians and case managers

Recommendation #2 – Ensure that Informed Consent is obtained and documented in the client's chart on an annual basis. Specific reference was made to the *failure to document informed consent for four clients* who received treatment with psychotropic medication.

- 1. Sara Jimenez McSweyn, LCSW, El Centro's Head of Service *found* the informed consent for psychotropic medication document for all four clients cited in the Client Chart Documentation log (May and June 2009) utilized by the auditor controller's staff.
- 2. We believe that the error occurred because these documents were misfiled in the wrong section when the audit was conducted. We will ensure that these documents are correctly filed in the future to prevent this issue from recurring.

We want to thank Sukeida Day, LCSW, specifically for her thorough and helpful feedback and wish to share, as we did with her, that we remain interested in any future training or support that may be forthcoming from the Auditor Controller's office or the Department of Mental Health to ensure that future audits reflect El Centro's full compliance with all contractual expectations and requirements.

Sara Jimenez McSweyn, LCSW

Clinical Director

El Centro del Pueblo, Inc.

Cc: Sandra Figueroa Villa Executive Director El Centro del Pueblo, Inc.

				·	
					•
		*			